

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

C RICO

FEB 0 7 2020

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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## FLORIDA PROFIT/NON PROFIT CORPORATION ING INTERNATIONAL CORP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$78.75

C RICO FEB 0.7713

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

RTICLE II PRINCI				
S WEST FLAGLER \$1	Principal <u>street</u> address IR RETT SUITTE 900	Mailing address, if different is: 5931 NW 173 DR STE 9		
иамі, fl 33130		MIAMI, FL 33015		
		-		
RTICLE III PURPO	SE e corporation is organized is:			
NY AND ALL LAWF	ULL BUSINESS			
,				
•			0	
	<b>)</b>		FEB	
RTICLE IV SHARI	<u>:s</u> 180		7-7	
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Name and	d Title; Diego J Rodriguez Romero (VP)	Name and Title	Angie P Giraldo Arias (Secretary)
Address	66 WEST FLAGLER STREET STE 900	Address:	66 WEST FLAGLER STREET STE 90
	MIAMI, FL 33130		MIAMI, FL 33130
		_	
			<del></del> -
	REGISTERED AGENT		
	orida street address (P.O. Box NOT acceptable) of LUIS FROSALES	t the registered ag	eat is:
Name;	5931 NW 173 DR STE 9	-	•
71404 034.	MIAMI, FL 33015	-	
4 PT (^ ( W 1/2)   1	. INCORPORATOR	-	
	NÇORPORATOR		
The name and ad	dress of the Incorporator is:		
Name:	LUIS F ROSALES		
Address:	5931 NW 173 DR STE 9		
	MIAMI, FL 33015		
ARTICI E VIII	EFFECTIVE DATE:		
Effective date, if o	ther than the date of filing:	IO1.	PTIONAL)
(If an effective da filing.)	ite is listed, the date must be specific and canno	t be more than fl	ve days prior or 90 days after the
Note: If the date i	inserted in this block does not meet the applicable	statutory filing re	muirements, this date will not be listed as
the document's eff	fective date on the Department of State's records.		4-payment and talle will not be listed as
Having been name this certificate, I at	ed us registered agent to accept service of process m familiar with and accept the appointment as reg	for the above stu istered agent and	ted corporation at the place designated in
			02/05/2020
	Required Signature/Registered Agent		Date
I submit this docu	ment and affirm that the facts stated herein are	rue. Lam aware	that the false beforeasion submitted in a
document to the D	epartment of State constitutes a third degree felon	as provided for i	in s.817.155, F.S.
	To Stande		¢2/05/2020
Requir	Signature/Incorporator	···-	Date